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NT	APPLICATION	J FFF	DETERMINATION DE					

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2001

Application or Docket Number

(0()8947()

CLAIMS AS FILED - PART I (Column 1) (Column 2)				mn 2)	SMALL ENTITY TYPE COR				OTHER THAN SMALL ENTITY			
TOTAL CLAIMS			1333.,,,				'	RATE	FEE	OR 1		· ·
FOR .			NUMBER	R FILED NUM		ER EXTRA		BASIC FEE		OR	RATE BASIC FEE	1/5 T
TOTAL CHARGEABLE CLAIMS			## minus 20= *		• _	. 27		X\$ 9=		1	X\$18=	2/7
INDEPENDENT CLAIMS			minus 3 =		• -					OR	<u> </u>	Jac
MULTIPLE DEPENDENT CLAIM P			<u> </u>				X42=	ļ	OR	X84=		
	the difference	la saluma d'is						+140=		OR	+280=	
- 11		in column 1 is				xolumn 2		TOTAL		OR	TOTAL	1411)
5-13-25 (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL	
ENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MENDMENT	Total	•	Minus	- 4	10	3		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	, ,	3		ľ	X42=		OR	X84=	
	FIRST PRESE	NTATION OF MI	JUMPLE DEF	ENDENT	CLAIM			+140=			+280=	
							L	YOTAL		OR	TOTAL	
		(Column 1)		(Colun	no 21	(Column 3)	A	DOIT. FEE		OR	ADDIT. FEE	<u> </u>
_		CLAIMS		HIGH	EST	(Column 3)	ſ		ADDI-	1		4001
		REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL FEE
	Total	• 43	Minus	4	Ũ	-,3		X\$ 9=	7 645_	OR	X\$18=	(7)
THE S	Independent	• 2	Minus	***	2	2		X42=	$\overline{}$	OR	X84=	<u> </u>
`	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM		▎┠		-			
							L	+140= TOTAL		OR	+280=	1571
		·					A	DOIT. FEE		OR ,	TOTAL LODIT. FEE	/3/)
_		(Column 1)		(Colun		(Column 3)	_			_		
DMEN		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		2	╽	X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		.	┢	X42=		ŀ	X84=	
١	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		│ ├ -			OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
- 1	f the "Highest Nur	nn 1 is less than th nber Previously Pa mber Previously Pa	id For IN THIS	SPACE is	less than	20, enter "20."	AE	TOYAL DIT. FEE		OR ,	TOTAL ODIT. FEE	
		ber Previously Pak					found	d in the app	ropriate box	in colu	mn 1.	